Application or Docket Number

Effective October 1, 2001									1376	20	- 178.	3	
			(Column 1)		(Column 2)		SMALI TYPE	SMALL ENTITY TYPE		OR	OTHER THAN OR SMALL ENTITY		
TOTAL CLAIMS			95				RAT	E	FEE	1 1	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	370.00	OR	BASIC FEE	740.00	
TOTAL CHARGEABLE CLAIMS			45 minus 20=		*2 5		X\$ 9)=		OR	X\$18=	450	
INDEPENDENT CLAIMS			5 minus 3 =		* 2		X42	X42=		OR	X84=	1628	
MULTIPLE DEPENDENT CLAIM PR			RESENT				446	.110			000	100	
* If	the difference	in column 1 is	less than zero, enter "0" i			column 2	+140			OR	+280=		
••							TOTA	VL [OR	TOTAL	1.358	
	C		MENDED - PART II (Column 2) (Column 3)				SMALL ENTITY			OR	OTHER THAN R SMALL ENTITY		
		(Column 1) CLAIMS		HIGH		(Column 3)	- Cilia) 1	OMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	* 50	Minus	** 4	5	=5	X\$ 9	=		OR	X\$18=	90.00	
	Independent	* 6	Minus	*** 5		=	X42	=		OR	X84=	84.00	
	FIRST PRESENTATION OF MULTIPLE DEPENDENT				T CLAIM		+140	_		OR	+280=		
								ΓAL		اما	TOTAL	174.50	
(Column 1) (Column 2) (Column 3)								EE L		OR	ADDIT. FEE	e pd	
		(Column 1)			HEST	(Column 3)				1 1			
AMENDMENT B		REMAINING AFTER AMENDMENT		NUM PREVI	BER OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=		
	Independent	*	Minus	***		=	X42	=		OR	X84=		
	FIRST PRESE	NTATION OF MI	JLTIPLE DE	PENDEN	CLAIM		+140	_		OR	+280=		
TOTAL ADDIT. FEE										OR	TOTAL		
(Column 1) (Column 2) (Column 3)								EE L			ADDIT. FEE		
		CLAIMS			EST	(Column 5)			1001	l	,		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVI	IBER OUSLY FOR	PRESENT EXTRA	RAT	E	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	*	Minus	**		=	X\$ 9	=	, , , ,	OR	X\$18=	1 1 1 1	
	Independent	*	Minus	***		=-	X42:				X84=		
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDE				T CLAIN		7,72	\dashv		OR	7.5 !-		
+140=										OR	+280=		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3. ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												